

02 MAR 2006

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Winston Abeyrando

Application or Docket Number

10/554290

Winston Abeyrando

## CLAIMS AS FILED - PART I National Stage Processing

Patent Specialist

(703) 325-6221

SMALL ENTITY  
TYPE OTHER THAN  
SMALL ENTITY  
(703) 325-3421

(Column 1)

U.S. NATIONAL STAGE FEES			
BASIC FEE	SMALL ENT. = \$ 150	LARGE ENT. = \$ 300	
EXAMINATION FEE	Satisfies PCT Article 33(1)- (4) = \$ 50 / \$ 100	All other situations = \$ 100 / \$ 200	
SEARCH FEE	U.S. is ISA = \$ 50 / \$ 100 ALL other countries = \$ 200 / \$ 400	All other situations = \$ 250 / \$ 500	
FEE FOR EXTRA SPEC. PGS.	minus 100 =	/ 50 =	
TOTAL CHARGEABLE CLAIMS	27 minus 20 =	- 7.	
INDEPENDENT CLAIMS	1 minus 3 =	- 2.	
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>	

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY	OTHER THAN SMALL ENTITY
RATE	RATE
BASIC FEE	300
EXAM. FEE	200
SEARCH FEE	400
X \$ 125 =	X \$ 250 =
X \$ 25 =	X \$ 50 = 350
X \$ 100 =	X \$ 200 =
+ \$ 180 =	+ \$ 360 =
TOTAL	TOTAL 250

## CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		Minus	**	=	
Total	*	Minus	**	=	
Independent					
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

SMALL ENTITY	OTHER THAN SMALL ENTITY
RATE	ADDITIONAL FEE
X \$ 25 =	X \$ 50 =
X \$ 100 =	X \$ 200 =
+ \$ 180 =	+ \$ 360 =
TOTAL ADDIT. FEE	TOTAL ADDIT. FEE

AMENDMENT B	(Column 1)	(Column 2)	(Column 3)	SMALL ENTITY	OTHER THAN SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE
	Total	*	Minus	**	ADDITIONAL FEE
	Independent	*	Minus	***	X \$ 25 =
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				X \$ 50 =
	AMENDMENT B	(Column 1)	(Column 2)	(Column 3)	OTHER THAN SMALL ENTITY
	Total	*	Minus	**	X \$ 100 =
	Independent	*	Minus	***	+ \$ 180 =
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				+ \$ 360 =
	AMENDMENT B	(Column 1)	(Column 2)	(Column 3)	TOTAL ADDIT. FEE
	Total	*	Minus	**	TOTAL ADDIT. FEE
	Independent	*	Minus	***	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.